Division of Corporations Electronic Filing Cover Sheet

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(((H12000259191 3)))

OCT 3 0 2012

L. SELLERS

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KIRWIN NORRIS Account Number: 120090000105 : (407)740-6600

: (407)740-6363 Fax Number

**Enter the email address for this business entity to be used for fugure annual report mailings. Enter only one email address please.

Koman @ Cornerstone

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN POMPANO OAKS PARTNER INTERESTS, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

Nov Accorporate Filing Menu

10/29/2012

TO:

COVER LETTER

| | istration Section sion of Corporations | | | | |
|--------------------------|---|--|--|--|--|
| SUBJECT: | Pompono Oa | iks Partner Interests, L | .LC | | |
| SCHOOL I, | | Limited Liability Company | | | |
| The enclosed | Articles of Amendment and fee(s) an | e submitted for filing. | | | |
| Please return | all correspondence concerning this m | atter to the following: | | | |
| | | Leyani Roman | | | |
| | | Name of Person | | | |
| Cornerstone Group | | | | | |
| | | Firm/Company | , | | |
| 2100 Hollywood Boulevard | | | | | |
| Address | | | | | |
| | | | | | |
| | | | | | |
| | Leyan | i.Roman@CornerstoneGri | notification) | | |
| For further in | formation concerning this matter, plea | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | Leyani Roman | at (786) | 709-2230 ayılme Telephone Number | | |
| | Name of Person | Area Code & D | ayılme Telephone Number | | |
| Enclosed is a | check for the following amount: | | · | | |
| ₹ 25.00 Fii | ing Foc \$30.00 Filing Fee & Certificate of State | \$55.00 Filing Fee & S Certified Copy (additional copy is enc | \$50.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |

MAILING ADDRESS: Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Pompano O | aks Partner Interes | ts, LLC | |
|---|--|--|--|
| (Name of the Limited Liabil (A Florid | ity Company as it now appe a Limited Liability Company | ars on our records.) | |
| The Articles of Organization for this Limited Liability | Company were filed on | October 4, 2012 | and assigned |
| Florida document numberL12000126791 | | | _ • |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the li | mited liability company h | ere: | |
| The new name must be distinguishable and end with the w | vords "Limited Liability Com | pany," the designation "LL | .C" or the abbreviation |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADI | | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | |
| B. If amending the registered agent and/or reg registered agent and/or the new registered office ad | | our records, enter th | e name of the new |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | City | , Florida | Zip Code |
| New Registered Agent's Signature, if changing Registe. | · | • | Zip Code |
| I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang | nt and agree to act in this and complete performanc agent as provided for in t ared office address, I herei | capacity. I further agre e of my duties, and I an Chapter 608, F.S. Or, if | fumiliars with and this document is |
| | If Changing Registered Ap | ent, Signature of New Rogi | stered Agent |
| | Page 1 of 2 | ; - | |

MGR = Manager

MGRM = Managing Member

P.04

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

| <u>Title</u> | Name | Address | Type of Action |
|--------------|--|---|----------------|
| MGRM | JL Holding Corp. | 2100 Holywood Blvd Hollywood, Ft. 33020 | Add Remove |
| <u>MGRM</u> | Jorge Lopez and Awilda Lopez, as Tenants by the Entireties | 2100 Holywood Blvd. Hollywood, Ft. 33020 | Add Remova |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | , | | Add Remove |
| D. If amend | ling any other information, enter chan | ge(s) here: (Attach additional sheets, if necessary.) | |
| _ | | | |
| _ | | | |
| Dated | October 17 20 | 012 100 | •• |
| | Signature of a membe | r or authorized representative of a member | |
| | Турес | or printed name of signee | - |

Page 2 of 2

Filing Fee: \$25.00